

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

Application or Docket Number
10/529692

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|--|---|
| U.S. NATIONAL STAGE FEES | | |
| BASIC FEE | SMALL ENT. = \$ 150 | LARGE ENT. = \$ 300 |
| EXAMINATION FEE | Satisfies PCT Article 33(1) (4) = \$ 50 / \$ 100 | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE | U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS. | minus 100 = | / 50 = |
| TOTAL CHARGEABLE CLAIMS | 13 minus 20 = | |
| INDEPENDENT CLAIMS | 1 minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE ☐

OR
OTHER THAN
SMALL ENTITY

| RATE | FEE | | RATE | FEE |
|------------|-----|----|------------|------------|
| BASIC FEE | | OR | BASIC FEE | 300 |
| EXAM. FEE | | | EXAM. FEE | 200 |
| SEARCH FEE | | | SEARCH FEE | 400 |
| X \$ 125 = | | | X \$ 250 = | |
| X \$ 25 = | | OR | X \$ 50 = | |
| X \$ 100 = | | OR | X \$ 200 = | |
| + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL | | OR | TOTAL | |

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|---|---|------------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * 11 Minus | ** 20 | = - |
| Independent | * 1 Minus | *** 3 | = - |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY

OR
OTHER THAN
SMALL ENTITY

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|---------------------|-------------------|----|---------------------|-------------------|
| X \$ 25 = | | OR | X \$ 50 = | |
| X \$ 100 = | | OR | X \$ 200 = | |
| + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|---|---|------------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * 11 Minus | ** 20 | = - |
| Independent | * 1 Minus | *** 3 | = - |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|---------------------|-------------------|----|---------------------|-------------------|
| X \$ 25 = | | OR | X \$ 50 = | |
| X \$ 100 = | | OR | X \$ 200 = | |
| + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.